

JUL 25 2005

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 740756-2205
<b>CERTIFICATE OF MAILING OR TRANSMISSION</b> [37 CFR 1.8(a)]  I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mimi Stop Amendment Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, or being facsimile transmitted to the USPTO at 571-273-8300 on July 18, 2005.  Signature: <u><i>John F. Guay</i></u> Name: John F. Guay	In re Application of : Ritsuko Kawasaki	
	Application Number: 09/651,889 Filed: August 30, 2000	
	For: MANUFACTURING METHOD OF DISPLAY DEVICE	
	Group Art Unit : 2891	Examiner: Dana Farahani
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  The requested extension and appropriate entity fee are as follows (check time period desired):		
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120)		\$ <u>120.00</u>
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$225/\$450)		\$ _____
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$510/\$1020)		\$ _____
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$795/\$1590)		\$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1080/\$2160)		\$ _____
<input type="checkbox"/> Applicant claims small entity status. <input type="checkbox"/> A check to cover the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>19-2380</u> . I have enclosed a duplicate copy of this sheet.		
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>		
I am the <input type="checkbox"/> applicant/inventor <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____		
<u><i>John F. Guay</i></u> Signature		<u>July 25, 2005</u> Date
<u>John F. Guay (Reg. No. 47,248)</u> Typed or printed name		<u>202-585-8000</u> Telephone Number
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input type="checkbox"/> Total of _____ forms are submitted.		

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 740756-2205
<div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> <p style="text-align: center; margin: 0;">CERTIFICATE OF MAILING OR TRANSMISSION (37 CFR 1.8(a))</p> <p style="font-size: small; margin: 5px 0;">I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop Amendment Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, or being facsimile transmitted to the USPTO at 571-273-8300 on July 18, 2005.</p> <p style="margin: 5px 0;">Signature: <u><i>John F. Guay</i></u></p> <p style="margin: 5px 0;">Name: <u>John F. Guay</u></p> </div> <div style="width: 60%;"> <p style="margin: 0;">In re Application of : Ritsuko Kawasaki</p> <hr/> <p style="margin: 0;">Application Number: 09/651,889      Filed: August 30, 2000</p> <p style="margin: 0;">For: MANUFACTURING METHOD OF DISPLAY DEVICE</p> <hr/> <div style="display: flex;"> <div style="flex: 1;">Group Art Unit : 2891</div> <div style="flex: 1;">Examiner: Dana Farahani</div> </div> </div> </div>		
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate entity fee are as follows (check time period desired):</p> <div style="display: flex; justify-content: flex-end; margin-top: 10px;"> <div style="text-align: right; margin-right: 20px;">\$ <u>120.00</u></div> <div style="margin-right: 20px;"> <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120)         </div> <div style="text-align: right;">\$ _____</div> </div> <div style="display: flex; justify-content: flex-end; margin-top: 10px;"> <div style="margin-right: 20px;"> <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$225/\$450)         </div> <div style="text-align: right;">\$ _____</div> </div> <div style="display: flex; justify-content: flex-end; margin-top: 10px;"> <div style="margin-right: 20px;"> <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$510/\$1020)         </div> <div style="text-align: right;">\$ _____</div> </div> <div style="display: flex; justify-content: flex-end; margin-top: 10px;"> <div style="margin-right: 20px;"> <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$795/\$1590)         </div> <div style="text-align: right;">\$ _____</div> </div> <div style="display: flex; justify-content: flex-end; margin-top: 10px;"> <div style="margin-right: 20px;"> <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1080/\$2160)         </div> <div style="text-align: right;">\$ _____</div> </div> <div style="margin-top: 10px;"> <input type="checkbox"/> Applicant claims small entity status.         </div> <div style="margin-top: 10px;"> <input type="checkbox"/> A check to cover the fee is enclosed.         </div> <div style="margin-top: 10px;"> <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.         </div> <div style="margin-top: 10px;"> <input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.         </div> <div style="margin-top: 10px;"> <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>19-2380</u>. I have enclosed a duplicate copy of this sheet.         </div> <p style="margin-top: 10px;"><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p> <p style="margin-top: 10px;">I am the <input type="checkbox"/> applicant/inventor</p> <div style="margin-left: 40px;"> <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).         </div> <div style="margin-left: 40px;"> <input checked="" type="checkbox"/> attorney or agent of record.         </div> <div style="margin-left: 40px;"> <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____         </div> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 60%;"> <p style="text-align: center; margin: 0;"> <u><i>John F. Guay</i></u>              Signature           </p> <p style="margin: 0;">John F. Guay (Reg. No. 47,248)</p> </div> <div style="width: 40%; text-align: center;"> <p style="margin: 0;">July 25, 2005</p> <p style="margin: 0;">Date</p> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> <p style="margin: 0;">_____ Typed or printed name</p> </div> <div style="width: 40%; text-align: center;"> <p style="margin: 0;">202-585-8000</p> <p style="margin: 0;">Telephone Number</p> </div> </div> <p style="font-size: small; margin-top: 10px;">NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <div style="margin-top: 10px;"> <input type="checkbox"/> Total of _____ forms are submitted.         </div>		

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